

**ARMY FAMILY TEAM BUILDING (AFTB)
STUDENT MANAGEMENT RECORD**

For use of this form, see AR 608-48; the proponent agency is OACSIM

TO BE COMPLETED BY AFTB PERSONNEL FOR EACH STUDENT PARTICIPANT.

1. INSTALLATION/COMMUNITY

2. DATE OF TRAINING

3. TRAINING SITE

4. LEVEL OR MODULE(S)

	LAST NAME	FIRST NAME	FAMILY MEMBER	RANK OF SPONSOR	EMAIL ADDRESS	COMPLETED
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						